
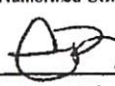
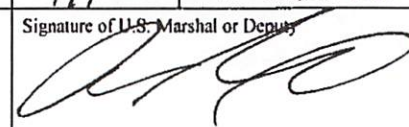


U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF United States of America		COURT CASE NUMBER 19-CR-10063-DJC
DEFENDANT Randall Crater		TYPE OF PROCESS Subpoena to Testify at Criminal Trial
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN Keeper of Records, Allied Wallet, Inc., Registered Agent: The Company Corporation	
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 251 Little Falls Drive, Wilmington, DE 19808	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW Scott P. Lopez, Esq. Lawson & Weitzen, LLP 88 Black Falcon Avenue, Suite 345 Boston, MA 02210		Number of process to be served with this Form 285 1
		Number of parties to be served in this case TBD
		Check for service on U.S.A.
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):		

Signature of Attorney or other Originator requesting service on behalf of: 	<input type="checkbox"/> PLAINTIFF <input checked="" type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 617-439-4990	DATE 6/28/2022
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE			
I acknowledge receipt for the total number of process indicated (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 358	District to Serve No. 15
Signature of Authorized USMS Deputy or Clerk 		Date 6/29/22	
I hereby certify and return that I <input checked="" type="checkbox"/> have personally served, <input type="checkbox"/> have legal evidence of service, <input type="checkbox"/> have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.			
<input type="checkbox"/> I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)			
Name and title of individual served (if not shown above)		Date 7/1/22	Time 0926 <input checked="" type="checkbox"/> am <input type="checkbox"/> pm
Address (complete only different than shown above)		Signature of U.S. Marshal or Deputy 	

Costs shown on attached U.S.M.S. Cost Sheet >>

REMARKS

D/DE - 5.4 miles one way / 11.2 round trip x .625¢/mile = \$7.00
- 1 Deputy x 1 hr x \$65/hr = \$65.00
- Total fees = \$72.00

2022 JUN 29 PM 5:02
U.S. MARSHALS SERVICE
BOSTON, MA

AO 89 (Rev. 03/09) Subpoena to Testify at a Hearing or Trial in a Criminal Case (Page 2)

Case No.

PROOF OF SERVICE

This subpoena for (name of individual and title, if any) ruied wallet Inc
 was received by me on (date) 7/1/22.

☒ I served the subpoena by delivering a copy to the named person as follows: Registered Agent
[251 Little Falls]
 on (date) 7/1/22; or

☐ I returned the subpoena unexecuted because: _____

Unless the subpoena was issued on behalf of the United States, or one of its officers or agents, I have also
 tendered to the witness fees for one day's attendance, and the mileage allowed by law, in the amount of

\$ _____
 My fees are \$ 7.00 for travel and \$ 65.00 for services, for a total of \$ 72.00
0.00

I declare under penalty of perjury that this information is true

Date: 7/1/22


 Server's signature

Day O.S. Marshall Smith
 Printed name and title

844 N. King St 1100 W/A 19801
 Server's address

Additional information regarding attempted service, etc:

- 5.6 miles one way / 11.2 Roundtrip X .625¢/mile = \$7.00
- 1 Deputy X 1 hr X \$65/hr = \$65.00
- Fees: Total \$72.00